

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			09/39/
FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      0 ..... Objected

Claim	Final	Original	Date
1	✓	✓	10/23/03
2	✓	✓	10/23/03
3	✓	✓	10/23/03
4	✓	✓	10/23/03
5	✓	✓	10/23/03
6	✓	✓	10/23/03
7	✓	✓	10/23/03
8	✓	✓	10/23/03
9	✓	✓	10/23/03
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If more than 150 claims staple additional sheet here